

CLAIMS ONLY								Application Number <div style="font-size: 1.2em; font-family: cursive;">10/6320619</div>		Filing Date	
								Applicant(s)			
								* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT						
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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Filing Date

10/632619
Applicant(s)

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